

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Nov 06, 2008
Secretary of State

DOCUMENT# N05000005032

Entity Name: CYPRESS ESTATES HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**9825 MARINA BLVD
100
BOCA RATON, FL 33428**New Principal Place of Business:**4931 CYPRESS WAY
COCONUT CREEK, FL 33073**Current Mailing Address:**C/O FLORIDA ONE PROPERTY MANAGEMENT
PO BOX 880269
BOCA RATON, FL 33488**New Mailing Address:**C/O KB2 MANAGEMENT LLC
PO BOX 451685
SUNRISE, FL 333451685**FEI Number:** 20-2915938**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BROWN, ARACELLI
9825 MARINA BLVD
100
BOCA RATON, FL 33428 US**Name and Address of New Registered Agent:**BAKKEDAHL, KRISTIN
9151 NW 25TH STREET
SUNRISE, FL 33322 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: KRISTIN BAKKEDAHL

11/06/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: RA () Delete
Name: BROWN, ARACELLI
Address: 9825 MARINA BLVD
City-St-Zip: BOCA RATON, FL 33428

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ARMENAKIS, JULIA
Address: 4931 CYPRESS WAY
City-St-Zip: COCONUT CREEK, FL 33073

Title: VP () Change (X) Addition
Name: HANSEN, ODETTE
Address: 4926 CYPRESS WAY
City-St-Zip: COCONUT CREEK, FL 33073

Title: SD () Change (X) Addition
Name: MCFARLAND, KIMBERLY
Address: 4963 CYPRESS WAY
City-St-Zip: COCONUT CREEK, FL 33073

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JULIA ARMENAKIS

PD

11/06/2008

Electronic Signature of Signing Officer or Director

Date